# FORM D

1214880

## **UNITED STATES** SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D. SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL	

Expires:

Prefix

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DATE RECEIVED

Serial

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SEC Mail Processing

Winington, BS	
Name of Offering ( check if this is an amendment and name has changed, and indicated Goldman Sachs Global Trading Advisors, LLC: Units of Limited Liability Control of Liability Contro	
Filing Under (Check box(es) that apply):   Rule 504   Rule 505   Rule 709   Rule 505   Rule 709   Rule 505   Rule 709   Rule 505   Rule 709   R	
A. BASIC IDENTIFICATION	Section -
1. Enter the information requested about the issuer	IN
Name of Issuer ( check if this is an amendment and name has changed, and indicate	te change.)
Goldman Sachs Global Trading Advisors, LLC	Washington, CG
Address of Executive Offices (Number and Street, City, State, Zip Cod c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York 10004	e) Telephone Number (including Americade)
Address of Principal Business Operations (Number and Street, City, State, Zip Co (if different from Executive Offices)	CFSSFD
Brief Description of Business	2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2
To operate as a private investment fund. MAR	2 2009 09002944
Type of Business Organization  corporation business trust  limited partnership, already formed	ON REUTEDS, ther (please specify): Limited Liability Corporation
Actual of Estimated Date of Incorporation of Organization.	Year 0 2 ☑ Actual ☐ Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Servi- State: CN for Canada; FN for other	

### GENERAL INSTRUCTIONS

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed

### ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collections of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. Enter the information requested for the following:	
<ul> <li>Each promoter of the issuer, if the issuer has been organized within the past five years;</li> </ul>	
* Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of the issuer;	of equity securities
* Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership	issuers; and
Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☑ General	and/or ng Partner
Full Name (Last name first, if individual)  Goldman Sachs Hedge Fund Strategies LLC (the Issuer's Managing Member)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
One New York Plaza, New York, NY 10004	
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Managi	l and/or ng Partner
Full Name (Last name first, if individual)	; •
Goldman Sachs Global Tactical Trading, LLC	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	<u> </u>
Check Box(es) that Apply: ☐ Promoter ☑ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General Managi	l and/or ing Partner
Full Name (Last name first, if individual)	
Goldman Sachs Princeton Fund, LLC	<del></del>
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	11.
CHOCK DON(CO) that rippi).	l and/or ing Partner
Full Name (Last name first, if individual)	
Barbetta, Jennifer	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	
*of the Issuer's Managing Member Managi	l and/or ing Partner
Full Name (Last name first, if individual)	
Clark, Kent	
Business or Residence Address (Number and Street, City, State, Zip Code)	
c/o Goldman Sachs Hedge Fund Strategies LLC, One New York Plaza, New York, New York 10004	
Check Dox(co) that ripps).	I and/or ing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(cs) that Apply. — I follote D Beneficial Owner — 200000000000000000000000000000000000	l and/or ing Partner
Full Name (Last name first, if individual)	
Business or Residence Address (Number and Street, City, State, Zip Code)	
(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)	<del></del>

A. BASIC IDENTIFICATION DATA

			<del>.</del>	B. IN	FORMAT	ION ABO	OUT OFF	ERING				
	<del>.</del>					•					Yes	No
1. Has th	ne issuer solo	d, or does th										Q
			A	Answer also	in Append	ix, Column	2, if filing t	under ULOI	Ξ.			
2. What is the minimum investment that will be accepted from any individual?								\$ 1,000,000*				
*The Managing Member of the Issuer, in its sole discretion, may accept subscriptions below the								Yes	No			
minimum.  3. Does the offering permit joint ownership of a single unit?												
	_										$\square$	
4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any												
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state												
	es, list the r							d are associ	ated person	s of such		
	er or dealer, e (Last name	<u> </u>		niormation	for that ore	oker or deal	er onty.					
run Nam	e (Last name	tirst, it inc	iividuai)									
	, Sachs & C											
Business	or Residence	e Address (l	Number and	Street, Cit	y, State, Zip	Code)						
	Street, Nev			104								
Name of A	Associated E	Broker or De	ealer									
	Which Perso 'All States"										[ <b>2</b> ] ∧1	l States
[AL]	(AK)	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[CO] [LA]	[ME]	[DE] [MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[MA]	[OH]	[OK]	[OR]	[PA]
(RI)	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
	e (Last name		· · · · · · · · · · · · · · · · · · ·			,		( · · · · · · ·		,	,	<u>, , , , , , , , , , , , , , , , , , , </u>
Business	or Residence	Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated B	roker or Do	aler				<del></del>					
States in V	Which Perso	n Listed Ha	s Solicited	or Intends t	o Solicit Pu	rchasers						
	All States" of						•••••••				🗆 Al	l States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]
rull Name	e (Last name	first, if ind	ividual)									
Business of	or Residence	: Address (1	Number and	Street, City	y, State, Zip	Code)						
Name of A	Associated B	roker or De	ealer									
	_											
	Which Perso All States" o								-			All States
[AL]	[AK]	[AZ]	[AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[AZ] [IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt	\$_	0	\$	0
	Equity	\$	0	\$	0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$_	0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (Specify: Limited Liability Company Interests	<b>\$</b>	397,615,263	\$	397,615,263
	Total			\$	
	Answer also in Appendix, Column 3, if filing under ULOE.	_	, ,	,	<u> </u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount of Purchases
	Accredited Investors	_	39	\$	397,615,263
	Non-accredited Investors	_	0	\$	0
	Total (for filings under Rule 504 only)	_	N/A	\$	N/A
	Answer also in Appendix, Column 4, if filing under ULOE.				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of offering		Type of Security		Dollar Amount Sold
	Rule 505		N/A	\$	N/A
	Regulation A	_	N/A	ς.	N/A
	Rule 504	_	N/A	\$ - \$	N/A
	Total	_	N/A	\$	N/A
th th	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of the expenditure is not known, furnish an estimate and check the box to the left of the estimate.			•	
	Transfer Agent's Fees		Q	\$_	0
	Printing and Engraving Costs			\$	0
	Legal Fees		$\square$	\$	16,353
	Accounting Fees			\$	0
	Engineering Fees			\$ _	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Expenses (identify)			\$ _	0
	Total			\$_	16,353

	C. OFFERING PRICE, N	NUMBER OF INVESTORS, EXP	PENS	SES A	ND USE OF PI	ROCE	EDS	
	<ul> <li>b. Enter the difference between the aggregation 1 and total expenses furnished difference is the "adjusted gross proceeds to</li> </ul>	in response to Part C - Question 4.a	. Th	is		\$_		397,598,910
5.	Indicate below the amount of the adjusted to be used for each of the purposes shown. furnish an estimate and check the box to payments listed must equal the adjusted groto Part C - Question 4.b. above.	If the amount for any purpose is not to the left of the estimate. The total	know of th	n, ne				
					Payments to Officers, Directors, & Affiliates			Payments To Others
	Salaries and Fees			\$	0		\$_	0
	Purchase of real estate			\$	0		<b>\$</b> _	0
	Purchase, rental or leasing and installation	of machinery and equipment		\$_	0		\$_	0
	Construction or leasing of plant buildings a	nd facilities		\$	0		\$_	0
	Acquisition of other businesses (including this offering that may be used in exchar another issuer pursuant to a merger)	ge for the assets or securities of	۵	\$	0		\$	0
	Repayment of indebtedness			\$ 	0	. –	\$	0
	Working capital			\$	0	. –	s –	0
	Other (specify): Investment Capital		_	* — \$	0	. <u>–</u>	* – \$	397,598,910
	Column Totals		_	\$_ \$_	0	. <b>2</b>	\$_ \$_	397,598,910
	Total Payments Listed (column totals added	l)			☑ \$	397,5	98,910	0
		D. FEDERAL SIGNATUI	RE					
tc	he issuer has duly caused this notice to be illowing signature constitutes an undertaking its staff, the information furnished by the iss	by the issuer to furnish to the U.S. Se	ecuriti	ies and	d Exchange Comm	nission,	upon	written request
Gol	er (Print or Type)  dman Sachs Global Trading Advisors,	Signature Omid W			Date February 200	)9		
LLo Nan	ne of Signer (Print or Type)	Title of Signer (Print or Type)				····		
Dav	rid Kraut	Vice President of the Issuer's Mana	ging !	Memb	oer			

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001).

SEC 1972 (7-00)